U S Department of Labor Office of Labor-Management Standards Washington DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved
Office of Management
and Budget
No 1215-0188
Expires 11 30-2006

This report is mandatory under P t. 86-257 as amended Failure to comply may result in criminal prosecution fines or civil penalties as provided by 29 U S C 439 or 440



1 File Number U 8682

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT

2 Fiscal Year Covered From

1 1 2004 Through 12 31 2004

3 Name and address of person filing	4 Name file number and address of labor organization		
Name ROBERT J BUSTOS	Name UNITED ASSOCIATION OF PLUMBERS LOCAL 342		
	Labor Organization File Number 033-320		
PO Box, Bidg Room No if any	P O Box Building and Room Number if any		
Street 935 DETROIT AVENUE	Street 935 DETROIT AVENUE		
City CONCORD 5	City CONCORD		
State California ZIP Code + 4 94518-2501	State California ZIP Code + 4 94518-2501		
5 Position in labor organization EXECUTIVE BOARD MEMBER			
Enter appropriate data below if during the past fiscal year you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions)			
A. Held an interest in engaged in transactions (including loans) with or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent			
6 Name and address of Employer (including trade name if any)	7 a Nature of Interest, Transaction or Income		
Name	NONE \$10 00		
Trade Name If any			
PO Box, Skig Room No if any			
	7 b Amount.		
Street			
City	0		
State ZiP Code + 4			
Signature Helent Shutes			
16 Signature and verification. The undersigned declares under penalty of Perjury and other applicable penalties of the law that all of the information submitted in this report (including the information contained in any accompanying documents) has been examined by the signatory and is to the best of the undersigned's knowledge and belief true correct and complete (See the section on penalties in the instructions.)			
Signed Halut Chut	On <u>8-11-05</u> <u>925 686 5886</u> Date Telephone Number		
5 (M. dp. (0000)			

Name of Person Filing ROBERT BUSTOS	Fik	e Number U	
B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested			
8 Name and address of Business (including trade name if any) Name Trade Name if any P O Box Bidg Room No if any Street City State ZIP Code + 4 10 If 9 b or 9 c is checked give trust or employer's name Name Trade Name if any P O Box Bidg Room No if any Street	9 Business deals with a Labor Organization b Trust c. Employer		
City	11 b Approximate dollar value o		
State ZIP Code + 4	12 a Nature of interest held or	r income received	
	12 b Amount		
C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value			
13 a Name and address of Employer or Labor Relations Consultant (Including trade name if any)	14 a Nature of payment.		
Name			
Trade Name if any			
PO Box, Bldg Room No if any		1 1	
State ZIP Code + 4			
13 b is the Business an Employer or Consultant ?	14 b Amount of payment	0	

LM-30

"I have made a diligent search of employers, businesses and/or vendors with which the union is involved. I have made as complete disclosure as I am advised by counsel that I am required to make, and I have made such required disclosures that, after a search of our records, I can now recall."

Robert Bustos

8-11-05

Date